## Approved For Release 2001/03/30 00200030022-9

MEDICAL STAFF CAREER SERVICE BOARD MEETING Wednesday, 21 May 1958

Dr. Tietjen Present: C/MS - Chairman . . . . . . . DC/MS - Voting Member . . . . . . . . C/TSD - Voting Member . . . . . . . 25X1A9a ADC/PS - Voting Member . . . . . AC/OD - Alternate Voting Member . . . Personnel Placement Officer . C/SD - Executive Secretary . . . . . . Secretary to C/MS - Recording Secretary . .

## 1. Minutes of Previous Meeting

The Minutes of the Medical Staff Career Service Board Meeting of 15 May 1958 were approved by the Members without comment.

## Career Staff Application

The Members voted to forward the Career Staff Application of 25X1A9a , GS-6, Secretary-Stenographer, to the CIA Selection Board as Type "A".

## 3. Career Program for Medical Officers

The Members continued their discussion of a career program for overseas medical officers based on a memorandum from Dr. dated 2 May 1958. With regard to the question of the number of overseas positions to be filled by medical officers, DC/MS re-emphasized his previous statement that, while it is hoped our overseas requirements will increase, it is not possible to make any such commitment and, therefore, the needs in numbers of overseas medical officers cannot be stated with accuracy at this time.

The ultimate purpose of the training, in Dr. ... view, would 25X1A9a be not specifically to fulfill Board requirements although it is conceivable that such would be the case. He pointed out that, while serving overseas, the physician is not always in a position to receive training and experience in general-type clinical medicine and this training would increase the efficiency of such doctors.

opinion that a one year's residency might be arranged in which several physicians could participate. Also, since it is recognized there are periods when doctors at Headquarters have no specific duties, they might use this opportunity to obtain training through formally-organized

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courses. C/TSD added the Medical Staff has enough contacts with installations in the Washington area that it would not be difficult to arrange a residency program with the help of our consultants.

Discussion then turned to the matter of what category of medical officer should be eligible for training. Dr. felt the Medical 25X1A9a Staff would profit in having a certain number of physicians who would be willing to serve an overseas tour, return to Headquarters for the training, and then return to another overseas post for a full tour. He believed the Medical Staff would have no difficulty in obtaining personnel for this type of career. The overseas medical officers are specifiopinion, they 25X1A9a cally included in this program because, in Dr. are the officers who are required to perform clinical medical duties whereas the majority of Headquarters officers do not have clinical responsibilities.

AC/OD pointed out that, in fulfilling its mission, the Medical Staff performs a great deal of operational medicine and that any contemplated training for medical officers assigned overseas should include this facet of training. He felt also that medical officers, to be effective, must serve tours of duty at Headquarters, in addition to their overseas duty. DC/MS also could not see any specific advantage to either the officer or the Medical Staff in remaining overseas for extended periods of time unless, of course, there are personal reasons involved.

The subject of the orientation of medical officers by the Medical Staff was discussed. It was the opinion of those officers present who had recently undergone this orientation that too much time is allotted to this program. AC/OD is in the process of preparing a revised briefing guide to be used for this purpose which will remedy this objection. Dr. felt that time now spent for orientation could be more profitably spent in formal training.

was requested to formulate a new statement of his views 25X1A9a Dr. I on this subject based on today's discussion. AC/OD expressed his will-25X1A@geness to assist Dr. in this project.

MS/mam

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